

September 24, 2015 CDC Ebola Response Update

[Announcer] This program is presented by the Centers for Disease Control and Prevention.

When the first case of Ebola was diagnosed in the United States and two nurses were subsequently infected with the disease, CDC recognized the need to tighten its guidance on infection control procedures for U.S. hospitals. Using the knowledge gained from managing these patients, CDC worked quickly to improve the way healthcare workers and hospitals around the country prepared to treat a person with a suspected case of Ebola. CDC and its partners held daily calls and live training events, created mobile training apps and web-based tools, and set up in-depth clinical trainings led by experts with experience treating these patients.

CDC also worked directly with state and local public health officials and hospitals to help them evaluate people with suspected cases of Ebola, including children. CDC consulted on 89 children with suspected cases from July 9, 2014 through January 4, 2015. About one third of these children had traveled from a country with Ebola; 32 had clinical signs or symptoms consistent with Ebola. As it turned out, none had Ebola, although many had more common, potentially serious illnesses, such as malaria and flu.

The evaluations revealed a need for child-specific training and protocols in health departments and hospitals. Because children have different physical, social, and emotional needs, caring for them can be a little more challenging.

This is where CDC's Children's Health Team stepped in. The team was created to address issues specific to children during emergencies. They worked with partners to make sure hospitals could care for the youngest patients suspected of having Ebola, while keeping their unique needs in mind. They worked with health departments to identify, train, and prepare hospitals for the possibility of treating a child with Ebola and initiated first-time guidance specifically targeted to children.

Planning for children raised new challenges and some sensitive questions, like whether parents would be allowed to be at their child's bedside. Before this outbreak, U.S. hospitals had never dealt with a case of Ebola, let alone a case in a child. To help hospitals address these issues, the Children's Health Team developed a call series that brought together forty hospitals in twenty states and the District of Columbia to discuss their experiences evaluating children for Ebola, the sustainability of Ebola readiness, and ways to use these preparedness activities for other possible emergencies.

Because of the combined efforts of these hospitals, state and local health departments, and CDC, the U.S. now has fifty-five hospitals designated as Ebola treatment centers; several of them are pediatric hospitals.

Although there haven't been any cases of Ebola reported in children in the U.S., healthcare workers and hospitals are now more prepared than ever to treat a pediatric patient with Ebola.

To get a full listing of designated hospitals, go to cdc.gov, and type *Ebola treatment centers* in the search box. You can read more about CDC's consultations with hospitals in the September 18 Morbidity and Mortality Weekly Report at cdc.gov/mmwr.

[Announcer] For the most accurate health information, visit www.cdc.gov or call 1-800-CDC-INFO.